UTILITY Takeshi SAITO, et al. First Inventor or Application Identifier PATENT APPLICATION ELECTRONIC COUPON SENDING AND COLLECTING SCHEME AND INFORMATION COLLECTING AND MANAGING SCHEME USING RADIO TRANSMITTAL TRANSMITTAL TRANSMITTAL TRANSMITTAL TRANSMITTAL TRANSMITTAL TRANSMITTAL TRANSMITTAL TRANSMITTAL Assignee Name: KABUSHIKI KAISHA TOSHIBA 72. Horikawa-cho, Saiwai-ku, Kawasaki-shi, Kanagawa-ken, Japan Assistant Commissioner for Patents APPLICATION ELEMENTS Box Patent Application Washington, DC 20231 ADDRESS TO: See MPEP chapter 600 concerning utility patent application contents Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing) ACCOMPANYING APPLICATION PARTS 7. □ Assignment Papers (cover sheet & document(s) 8. Application Data Sheet. See 37 CFR 1.76 **Total Sheets** 93 Specification 37 C.F.R. §3.73(b) Statement (when there is an assignee) □ Power of Attorney 24 **Total Sheets** 10. ☐ English Translation Document (if applicable) 3. ■ Drawing(s) (35 U.S.C. 113) (Formals) ☐ Copies of IDS Citations Information Disclosure Statement (IDS)/PTO-1449 11. 🗆 4 12. Preliminary Amendment 4. Oath or Declaration Total Pages White Advance Serial No. Postcard 13. a. Newly executed (original) Certified Copy of Priority Document(s) (2) (if foreign priority is claimed) Copy from a prior application (37 C.F.R, §1.63(d)) (for continuation / divisional w/ box 16 completed) DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C F R. §1 63(d)(2) and 1.33(b). Applicant claims small entity status. See 37 CFR 1.27 CD-ROM or CD-R in duplicate, large table or Computer Program (*Appendix*) Notice of Priority 16. **■** Other: L 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) Ę a. Computer Readable Form (CRF) <u>.</u> # b. Specification or Sequence Listing on: Ē i. CD-ROM or CD-R (2 copies); or □ Paper c. Statements verifying identity of above copies 17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below ☐ Continuation-in-part (CIP) of prior application no.: □ Continuation Divisional Group Art Unit: Prior application information: Examiner: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 18. Amend the specification by inserting before the first line the sentence: □ Division □ Continuation-in-part (CIP) ☐ This application is a □ Continuation of application Serial No. Filed on □ Which was published in English Which was not published in English ☐ This application claims priority of provisional application Serial No. Filed 19. CORRESPONDENCE ADDRESS 22850 (703) 413-3000 FACSIMILE: (703) 413-2220

Attorney Docket No.

202762US2RD

Name: Marvin J. Spivak

Signature: Date: 2/2/0)

Name: C. Irvin McClelland Registration No.:

Registration Number 21,124

Docket No. 202762US2RD

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Takeshi SAITO, et al. SERIAL NO: New Application

FILING DATE: Herewith

FOR: ELECTRONIC COUPON SENDING AND COLLECTING SCHEME AND INFORMATION COLLECTING

AND MANAGING SCHEME USING RADIO LAN

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	39 - 20 =	19	× \$18 =	\$342.00
INDEPENDENT CLAIMS	9 - 3 =	6	× \$80 =	\$480.00
☐ MULTIPLE DEPENDENT CLAIMS (If applicable) + \$270 =			\$0.00	
□ LATE FILING OF DECLARATION + \$130 =			\$0.00	
BASIC FEE				\$710.00
TOTAL OF ABOVE CALCULATIONS				\$1,532.00
□ REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
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■ The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. <u>15-0030</u>. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

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